encer Fane Britt & Browne, LLP 1000 Walnut Street, Suite 1400 Kansas City, MO 64106 United States of America

C DECLARAT	10N F0	D LITH ITV OD	Attorney Docket Nui	mber			
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			First Named Invento	First Named Inventor HUXEL		, Edward T.	
			COMPL	COMPLETE IF KNOWN			
			Application Number	/			
Declaration Submitted With Initial Filing		Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	DATE EVEN HEREWITH			
			Art Unit				
			Examiner Name				
As the below named in	ventor, I he	reby declare that:					
My residence, mailing ad	dress, and	citizenship are as stated belo	ow next to my name.				
I believe I am the original	and first in	ventor of the subject matter v	which is claimed and for whi	ich a pa	tent is sou	ght on the inver	ntion entitled:
		COATED	FLAKED FATS				
the specification of which	•						
	ı						
is attached hereto							
OR	ſ						
was filed on (MM/DD/YYYY)			as United States A	pplicatio	n Number	or PCT Interna	tional
	L		. <u></u>				
Application Number		and was amended on (MM/DD/YYYY) (if app			icable).		
			,				,
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
breeder's rights certificate States of America, listed I	(s), or 365(below and i	s under 35 U.S.C. 119(a)-(d) (a) of any PCT international have also identified below, b PCT international application	application which designated application which designated application application application application application which designated application application which designated application application which designated application appli	ted at le reign ac	east one condition f	ountry other that or patent, inver	an the United
Prior Foreign Application Number(s)		Country	Foreign Filing Date (MM/DD/YYYY)		ority laimed	Certified Cop YES	y Attached? NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code	1 /11/9		OR	Correspondence address below	
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Address					
City		State		ZIP	
Country	Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor					
Given Name		Family Name			
(first and middle [if any])		Family Name or Surname			
Inventor's Edward P. Hupel Signature Edward P. Hupel				Date 1/15/2002	
Residence: City	State	Coun	trv	Citizenship	
	•	<u>.</u>			
Mailing Address					
City	State	ZIP		Country	
NAME OF SECOND INVENTOR:	A petition ha	s been filed f	or this unsig	ned inventor	
Given Name (first and middle [if any])		Family Name or Surname			
		0. 00			
Inventor's Signature				Date	
orginature					
Residence: City	State	Count	n/	Citizenship	
residence. Ony	Juan	Count	<u>y</u>	Vidzerianip	
Mailing Address					
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City	State	ZIP		Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					





POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number				
Filing Date	Date Even Herewith			
First Named Inventor	HUXEL, Edward			
Title	COATED FLAKED FATS			
Group Art Unit				
Examiner Name				
Attorney Docket Number				

I hereby app	oint:				
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X Applican	t/Invent	or.			
☐ Assigned	a of reco	ard of the entire in	nterest. See 37 CFF	D 2 71	·
			is enclosed. (Form		96).
		SIGNATURE	of Applicant or Ass	ignee of F	Record
Name	Edwar	d T. Huxel			
Signature	Edw	aret T. Hu	yel .		
Date	1/15	12002			
NOTE: Signatures of all	the inven	tors or assignees of re	ecord of the entire inter	rest or their	representative(s) are required. Submit multiple
forms if more than one s		s required, see below ms are submitted	<i>r</i> .		